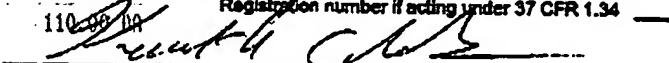


OCT 21 2004

PTO/SB/22 (10-04)
Approved for use through 07/31/2008. OMB 0651-0031
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003

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)
FY 2005 (Fee effective on or after October 1, 2004)		PA129-05D09
Application Number 10/775,707		Filed 02/10/2004
For APPARATUS TO ORIENTATE A BODY WITH RESPECT TO A SURFACE		
Art Unit 2834		Examiner Thomas M. Dougherty
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	Fee \$110 \$430 \$980 \$1530 \$2080	Small Entity Fee \$55 \$215 \$490 \$785 \$1040
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>502650</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,393</u>		
10/26/2004 PETITION 00060006-502650-10775707 01 FC:1251 Attorney or agent under 37 CFR 1.34. 110-39-1A Registration number if acting under 37 CFR 1.34		
 Signature		 Date
Kenneth C. Brooks Typed or printed name		512-339-7760 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.		
This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.		

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10775707

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	27	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20 = * 7	
INDEPENDENT CLAIMS	3 minus 3 = * 0	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	RATE
BASIC FEE	385.00
OR	BASIC FEE
X\$ 9 =	770.00
OR	X\$18 =
X43 =	126
OR	X86 =
+145 =	
OR	+290 =
TOTAL	TOTAL

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	10.21.04	CLAIMS REMAINING AFTER AMENDMENT	
	Total	* 27	Minus ** 27 =
	Independent	* 3	Minus *** 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	RATE
ADDITIONAL FEE	ADDITIONAL FEE
X\$ 9 =	X\$18 =
OR	X86 =
X43 =	
OR	+290 =
+145 =	
TOTAL ADDITIONAL FEE	TOTAL ADDITIONAL FEE

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	
	Total	* Minus ** =	
	Independent	* Minus *** =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9 =			X\$18 =	
OR			X86 =	
X43 =				
OR			+290 =	
+145 =				
TOTAL ADDITIONAL FEE			TOTAL ADDITIONAL FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	
	Total	* Minus ** =	
	Independent	* Minus *** =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9 =			X\$18 =	
OR			X86 =	
X43 =				
OR			+290 =	
+145 =				
TOTAL ADDITIONAL FEE			TOTAL ADDITIONAL FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.